



Treasurer's Office 455 N. Main – 12th Floor Wichita KS 67202

**AMBULANCE COMPANY
MEDI-COACH COMPANY
LICENSE APPLICATION**

*Complete in Duplicate. Please allow 10 days for processing.
Please use a separate form for each type of License Application.*

**CITY LICENSE
(316) 268-4553**

New

Renewal

Date

AMBULANCE COMPANY

Business, Fee \$100.00 exp December 31st
Vehicle, Fee \$20.00 annually per vehicle

MEDI-COACH COMPANY

Business, No Fee
Vehicle, Fee \$15.00 annually per vehicle

BUSINESS INFORMATION:

Business Name				Phone Number	
Business Address				Zip	
Number of Vehicles to be Operated		Name of Liability Insurance Company			

APPLICANT INFORMATION:

Applicant Name				Phone Number	
Residential Address				Zip	

OWNER INFORMATION: Please provide the following information for each partner or, if a corporation, each officer, director, and stockholder holding any interest in the corporation. If more space is needed, use blank sheets to answer each question.

Name				Home Phone	
Residential Address				Zip	

If applying for Medi-Coach license, please answer the following question:

Has any person listed on this application been convicted of a felony? yes no (If yes, please explain in detail on a separate sheet of paper)

VEHICLE INFORMATION (attach additional sheet if more than one vehicle)

Make		Model	
Year		Motor Number	
Color and Design		State License Number	
VIN Number		License Tag Number	
Number of person vehicle constructed to carry		Proposed number of passengers	

PLEASE ENCLOSE A LIST OF FARES TO BE CHARGED FOR SERVICES RENDERED TO THE PUBLIC AND A CURRENT COPY OF LIABILITY INSURANCE FOR EACH VEHICLE.

I hereby certify that I have read and am familiar with the ordinances of the City of Wichita and with the requirements thereof as the pertain to my license. Further, under penalty of perjury, I certify that all information provided is true and accurate to the best of my knowledge.

Signature of Applicant

Date

FOR OFFICIAL USE ONLY

	Approved	Disapproved	Date
Environmental Health			
Law Dept (insurance approval)			
License #	Date	Released	Expiration

